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ABSTRACT

This document details a strategy to bring together state and community leaders in the southeastern United States to establish dialogue, set priorities, and make system-wide changes for supporting literacy for the youngest children and their families. The Head, Heart, and Hands campaign has three focal points: (1) Head--understanding research and best practices that affect children's development and preparing them to enter school ready to learn; (2) Heart--creating, spreading, and harnessing the will and commitment to nurture and support young children and families; and (3) Hands--working across disciplines to forge a strong, unified system of policies and programs. The document begins with suggestions for a campaign kick-off meeting, followed by a position paper outlining a rational for the campaign. The next four sections of the document address the following areas: (1) research evidence on brain development, parental nurturance, health and nutrition, quality child care, and literacy development; (2) the need for action, focusing on the risk level of children in southern states and the impact of investing in the future; (3) core areas for action, presenting a vision for supporting the families of infants and toddlers and describing effective programs in the southeast; and (4) suggested planning process, including a step-by-step process and a sample policy statement. The document concludes with information on the SERVE organization, which will act as a resource for state and community efforts in the campaign, and information on ordering SERVE products. (KB)

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Head, Heart, and Hands

for Our Youngest Children

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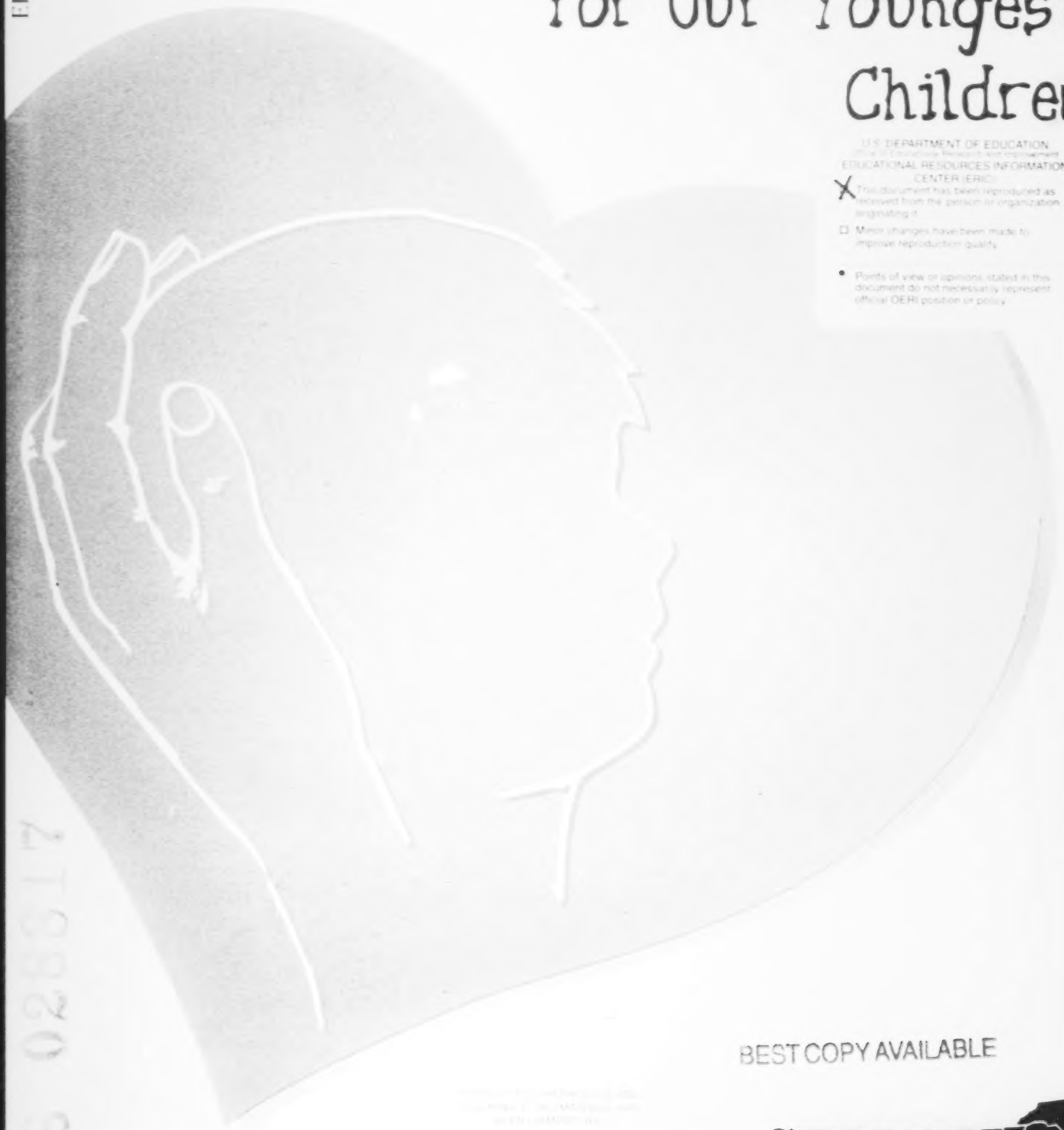

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PS 026017

Charles Ahearn

SERVEing Young Children
Literacy Project

SERVE
SouthEastern Regional
Vision for Education

Head, Heart, and Hands
for Our Youngest Children

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Rhonda Corley, Director of Early Childhood, School District of Greenville County, Greenville, SC

Charles Couch, Principal, Astoria Park Elementary School, Tallahassee, FL

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Starr Stewart, Home Visitation Coordinator, Family Service Center, Dothan, AL

and

Patty Molloy, Consultant

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Charles Ahearn, Director and Senior Editor, Publications

Lynn Amwake, Program Specialist, SERVEing Young Children

Glyn Brown, Program Specialist, SERVEing Young Children

Stephen Chapman, Program Specialist, Publications

Christa Karantinos, Design Specialist, Publications

Nancy Livesay, Program Director, SERVEing Young Children

Donna Nalley, Senior Program Specialist, Publications

Lucy Wynn, Program Specialist, SERVEing Young Children

Invitation to Join Head, Heart, and Hands for Our Youngest Children

The research is clear and compelling. Children benefit their *whole lives* from the love, protection, stimulation, and support they receive during their first three years of life—or they suffer from the lack of these experiences. Our babies are vulnerable. The opportunity to make a difference in an infant's life is tremendous, and time is precious.

Head, Heart, and Hands for Our Youngest Children is an effort to bring state and community leaders together to dialogue, establish priorities, and make systemwide changes for supporting literacy for our youngest children and their families. There are three focal points of the campaign:

Head

Understanding the latest research and best practices that affect the healthy development of young children and prepare them to enter school ready to learn. We are sharing this information with an ever-widening group of child advocates so that knowledge and awareness of these issues can effect systemic changes in policies and programs.

Heart

Creating, spreading, and harnessing the will and commitment to nurture and support young children and their families in our region and within our communities. We are using the shared commitment that emerges from our outreach to make an immediate impact on the lives of infants and toddlers.

Hands

Working together, across disciplines, our goal is to forge a strong, unified system of policies and programs here in the Southeast to ensure that all children have opportunities to develop to their fullest potential and become literate adults.

We invite you to join SERVE in forming a Task Force on Family Literacy to work with state and community leaders—educators, pediatricians, nurses, business leaders, legislators, leaders of religious and cultural organizations, government agency representatives, child care providers, parents, grandparents, hospital staff, health and social service practitioners, and others—who are concerned with children's literacy. After extensive dialogue and development of recommendations, we will advocate for systemwide policies and program improvements to support all of the young children and their families within our region. Please call SERVE at 800-352-6001 to learn more about how you can get involved in *Head, Heart, and Hands for Our Youngest Children*.

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Kick-off Meeting

Use the *Invitation to Join* to invite people to a kick-off meeting. Invitees will be asked to serve on an advisory board, such as a Task Force or Advisory Council, that will develop policy recommendations about needed services and infrastructure. Invitees should include state and community leaders—educators, pediatricians, nurses, business leaders, legislators, leaders of religious and cultural organizations, government agency representatives, child care providers, parents, grandparents, hospital staff, health and social service practitioners, and others—who are concerned with children's growth and development.

At the kick-off meeting (or perhaps prior to it), all participants should receive a copy of the position paper. It will ensure that everyone shares an understanding of the issues. Have several guest speakers, perhaps experts from within the state, talk briefly (20-30 minutes) about key topics from the paper, such as brain development, child health, and/or comprehensive services for children and families. Then, divide participants into work groups, discuss the paper, underscore issues raised by the speakers, and begin to define the work plan of the advisory board.

Pose this question to the participants:

Is the infrastructure in your state or community really doing the job in giving the most effective and systematic services and information to parents and their newborns (up to kindergarten)?

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Position Paper

How individuals function from the preschool years all the way through adolescence and even adulthood hinges to a significant extent on their experiences before the age of three. Researchers have thoroughly documented the importance of the pre- and postnatal months and the first three years, but a wide gap remains between scientific knowledge and social policy.

The Report of the Carnegie Task Force on *Meeting the Needs of Young Children*

A baby—a new life—symbolizes hope and promise. Yet, in the Southeast, the facts about our infants and toddlers paint a profoundly different picture. On many counts, the South ranks nearly the poorest in the nation in terms of conditions for children and families, including infant mortality, low-birthweight babies, higher rates of babies born to adolescent mothers, and literacy rates.

But there are glimmers of hope scattered across our region. Individual projects are demonstrating the effectiveness of special programs, services, and outreach efforts.

Family literacy efforts, such as Even Start and Early Head Start, are working with infants and toddlers and their families. Lessons are emerging about what works in promoting healthy child development, school readiness, and family literacy. Some common factors include the following:

- Beginning *at birth* with abundant nurturing and supportive experiences for infants and their parents, including home visiting, mother-infant bonding classes, and health care and adequate nutrition
- Promoting language-rich environments in which infants and toddlers are read to daily
- Attending to all areas of child development—social, emotional, physical, cultural, cognitive, aesthetic, and language
- Supporting the development of secure relationships between children and their parents and, when children are cared for by others, sustained relationships with primary caregivers

While these measures have proven successful on a small scale, they are only available to few, much less all, of our children. Many states lack the policies and infrastructure needed to ensure infant health and well-being—a comprehensive, coordinated system of care and services.

This paper suggests a course of action for state and community leaders across the Southeast to remedy this situation. Developed by SERVE, a regional consortium of educational organizations, the paper serves three primary purposes:

- To raise awareness about new research and best practices that have dramatically improved our understanding about the healthy development of infants and toddlers and underscore the critical importance of the first three years of life
- To identify ways that parents and child advocates can ensure that infants and toddlers experience nurturing activities that promote family literacy and school readiness
- To promote the development of an infrastructure in every SERVE state that will ensure coordinated education, child care, health, nutrition, and social services for all young children and their families

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This paper is envisioned as a starting point for dialogue among policymakers and other state and community leaders from a wide array of disciplines, including medicine, public health, education, child care, business and industry, and religious and social organizations, who impact programs and policies for young children and their families.

The paper aims to create a common understanding of research and best practices and highlight the need for systemic, coordinated action in every state across the southeastern United States. Section 1 briefly summarizes findings from research. Section 2 presents facts and figures that document the need for action in the Southeast, and Section 3 suggests core areas for action that are illustrated by examples of best practices. Because of the importance and value of locally generated solutions, Section 4 of the paper suggests a planning process to guide the development of recommendations for systemic change. This approach will help build local ownership and support and ensure that the outcomes reflect the needs and preferences of the state and its communities.

SERVE will act as a resource to *Head, Heart, and Hands for Our Youngest Children* so that your state or community's efforts will dovetail with concurrent national, state, and local efforts. We want these efforts to coalesce and support a groundswell of action addressing the needs of infants and toddlers and their families. Through a combination of policy change and program implementation, you can make a tremendous difference in the lives of our youngest citizens for their entire lives. We invite you to join us in this critical undertaking.

Vision and Mission. The mission of this project is to support family literacy and school readiness in the southeastern region. SERVE will act as a catalyst for the development of state and local policies, programs, and other ongoing, institutionalized commitments to ensure that all infants and toddlers get a healthy, nurturing start in life. The goal of SERVE's work is to ensure that each child attains a readiness level that will lead to success in school and eventually success in work and adult life.

Section 1: Research Evidence

We can now say, with greater confidence than ever before, that the quality of young children's environment and social experience has a decisive, long-lasting impact on their well-being and ability to learn....[However,] our policies reflect neither our growing knowledge of early brain development nor our understanding of factors that tend to protect young children or place them at risk.

Starting Points

Current research strongly suggests that healthy child development emerges from the interaction of a number of factors. For example, the Carnegie Task Force on Meeting the Needs of Young Children reports the following research findings:

Brain development before the age of one is more rapid and extensive than previously realized. Brain development is also much more vulnerable to environmental influence than previously believed. In fact, when a child's early environment does not provide adequate stimulation—frequent interaction, physical activity, and a variety of experiences—then the child's brain may fail to grow to its full potential.

A nurturing parent provides infants with a sense of basic trust that allows them to feel confident in exploring the world and forming positive relationships with other children and adults. When parents are not able to respond sensitively to their infants' needs, because of factors such as marital conflict, depression, or their own history of abuse, infants develop feelings of helplessness that lead to later difficulties.

Health and nutrition are critical in the first year of life, as babies triple in weight, double in length, and achieve 80% of their brain growth. Good nutrition fuels this growth, as well as dynamic motor development—creeping, crawling and walking. Good health care protects children from disease and corrects problems that interfere with normal growth. A safe environment enables children to grow without witnessing violence or trauma that can affect self-confidence.

Quality child care plays a critical role in ensuring that infants and toddlers experience healthy, nurturing stimulation while away from their parents. Yet quality and availability of child care is frequently problematic for new parents, especially those who are poor and without the support of extended family members. Availability of quality child care provides parents with choices while they work or go to school.

Literacy development begins at birth and is influenced by many factors, including infant stimulation, language-rich environments, and social interaction. Despite the apparent benefits of early intervention, participation and availability of programs are still limited.

Clearly, research demonstrates that by ensuring a good start in life, we have a better opportunity than previously imagined to promote learning and prevent damage. It is critically important that a comprehensive, coordinated system of education, child care, and support services be available for every infant and toddler and their families to promote lifelong literacy.

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Section 2: The Need for Action

The most crucial and formative experiences for a developing child are those provided in the first few years of life. In no other period do such astounding changes occur so rapidly. Within a span of three years, the newborn moves from a completely dependent human being into one who walks, talks, and explores. These years are the foundation for all subsequent learning and development, and their importance cannot be overstated. Your state's future depends on your willingness, and the willingness of others, to make children a top priority in the state. Don't miss this opportunity—our children are counting on us.

States Within the SERVE Region

- In 1996, Mississippi was ranked 49th for the percentage of children living in poverty. In 1995, they were ranked 50th.
- In 1995, it was reported that 17% of Mississippi's children live in extreme poverty.
- In Alabama, 36% of infants in 1995 were born with one or more health risks.
- In 1995, only 77% of two-year-olds in Alabama were immunized.
- In Georgia, 35% of all births in 1996 were to unmarried mothers.
- In 1995, 15,833 cases of child abuse or neglect were substantiated, including 16 fatalities. Of those cases, 3,829 children were removed from the home.
- In North Carolina, in 1996, 15% of all births were to teen mothers.
- In 1996, 27% of North Carolina's non-white mothers had less than a twelfth-grade education.
- In South Carolina, 20.6% of all babies born in 1996 had mothers who received no early prenatal care.
- According to 1996 statistics, 9.2% of infants born in South Carolina were of low birthweight.
- In 1995, 68 Florida children died due to abuse or neglect.
- In 1995, 170,727 cases of child abuse or neglect were reported in Florida.

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According to the Children's Defense Fund and Kids Count Data Book, southern states often rank very low when compared to other regions of the country on many indicators of infant health and well-being.

Investing in the Future

		Investment		Savings
Family Planning	+	$1	=	$4.40
Quality Preschool	+	$1	=	$7.16
Home Visits (High-Risk Pregnancy)	+	$1	=	$5.63
Measles Immunization	+	$1	=	$29
School-Based Clinics	+	$1	=	$7

Source of immunization ratios: CDC, 1996. Other ratios provided by Florida's Children & Their Future, *1994. (Note: This information is specific to Florida; however, something similar may be useful in your state.)*

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Section 3: Core Areas for Action

Policymakers must recognize that it pays to help families increase protective factors in raising their young children. Enhancing parents' social supports, encouraging positive parenting practices, and stimulating the child's cognitive development all appear effective in enabling children to achieve a good start in life.

Starting Points

We have a new vision about how to best prepare and support parents as they care for their newborn children. The following chart compares the old system with this new vision of support for all parents.

Supporting the Families of Infants and Toddlers

The Old System	The New Vision
Parenting skills are expected to come naturally, and thus parents are reluctant to admit that they need help.	Parent education is widely available so parents can feel more knowledgeable, confident, and effective.
Many children are born with low birthweight, live in poverty, and experience insufficient stimulation, thus, entering school unprepared to learn.	Policies and programs support the well-being of all children by helping parents attend to all areas of child development—social, emotional, physical, cultural, cognitive, aesthetic, and language.
Parents fend for themselves and piece together child care that they can afford.	Parents have affordable, quality child care options that are predictable and stable.
Health care services are limited by health insurance coverage, if any, and parents' ability to pay for services.	Health care services are available for all young children, including well-child and acute care visits, immunizations, periodic health screening, preventive dental care, vision and hearing tests, and developmental and behavioral assessments.
Literacy is linked only to readiness for reading and cognitive development.	Literacy is supported from birth through a focus on the whole child and the parent's role as the child's first teacher.

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Effective Programs in the Southeast

Many states have developed successful programs designed to promote family literacy and improve the level of services for young children and their families. As a result, it is important to examine ways in which we can integrate this new emphasis on literacy with existing programs rather than starting from scratch, reinventing the wheel, or ignoring good programs that are already operating. Some examples of existing programs include the following:

Georgia's Nurse Midwifery Project (1986)
In 1986, Georgia initiated the Nurse Midwifery Project to recruit certified nurse-midwives to serve rural and underserved areas of Georgia. Within 3 years, more than 3,000 women and their infants had received prenatal care and delivery services through the project at a cost of only $1.4 million. Since implementing the project, Georgia officials have noted a decrease in the infant mortality rate. In 1988, the state's infant mortality was 12 deaths per 1,000 births; however, among infants whose mothers were served by the project, the rate was 8.2.

South Carolina's Caring for Tomorrow's Children
Caring for Tomorrow's Children is a program initiated by the state of South Carolina. It is designed to encourage and educate parents in the care and nurturance of their new baby. New parents receive a packet of information on a variety of topics including how to prepare for the arrival of the baby, attending to basic health needs, and developmental milestones. Parents also are provided with information regarding available resources and ways to find help within the community.

Early Head Start
In 1994, Congress authorized funding to specifically address the needs of infants and toddlers through the Early Head Start program. The money is used to provide a variety of services to poor families with children under the age of four and to poor pregnant women. How the funds are used is determined to some extent by the community served. Currently about 300 sites are receiving Early Head Start grants.

North Carolina's Smart Start
North Carolina has instituted a program entitled Smart Start. Under this program, parents, educators, physicians, child-care providers, and businesspeople form partnerships at the county level in order to set goals for the education and health care of children under the age of six. These partnerships are then able to administer and distribute private and public funds as they see fit. Currently, more than half of North Carolina's 100 counties are participating in the program.

Florida's Sunrise Initiative
Developed by the Florida Department of Education and the Florida Department of Children and Families, the Sunrise Initiative is designed to help and encourage parents to prepare their children for success in school. The packet features a set of five booklets containing developmental characteristics of infant, toddler, two-year-old, and preschool stages. They outline characteristics of children at various ages and stages and suggest activities parents can use to enhance their children's learning.

Other Programs

- Even Start
- State Councils or Governor's Initiatives
- Healthy Start
- Private/Foundation funded efforts
- Parents As Teachers

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Section 4:
Suggested Planning Process

In order to initiate this project, it will be important to convene a group of interested individuals and develop a plan of action. As in any planning process, there are steps that need to be taken in order to make your effort a success. Steps for initiating the process and developing a plan may include

1. **Forming a Team**
   As a first step, it is important to form a team of individuals who have a stake in improving literacy in your community. You may want to explore whether there is already a team in your community focusing on literacy. Teams should be broad-based and representative of the community served.

2. **Developing a Vision and Mission**
   An important milestone in developing a plan is the development of shared vision and mission statements. These statements will provide purpose and direction for team members.

3. **Conducting a Needs Assessment**
   A needs assessment is one of the essential tasks in any planning process and must be done before the development of a plan. It is the process of gathering information from all stakeholders in order to identify and better clarify needs.

4. **Setting Goals and Indicators**
   When the needs assessment has been conducted and results have been analyzed, team members will develop a set of goals and indicators for success. Clear articulation of the goals will help motivate and mobilize the team to action. Constant monitoring and evaluation will ensure a focus on outcomes.

5. **Reviewing the Research Base**
   A strong research base is critical to any planning or improvement effort. Taking the time to review good practice and learn about effective programs will provide a strong framework for planning.

6. **Developing an Action Plan**
   Now team members are ready to develop an action plan for achieving their goals. At this stage of the planning, team members will outline the strategies, resources, and timelines necessary for tackling each goal, and will develop an evaluation process.

7. **Providing Staff Development/Training**
   In order to support the continued growth and development of the team members, it is important to provide opportunities for personal and professional development.

While this process may vary slightly depending on the needs of the team and community, this is a general outline of the steps necessary to get started, stay focused, and achieve desired results. SERVE can help you use this process to guide the team through the planning and development of a plan.

Sample Policy Statement for Head, Heart, and Hands for Our Youngest Children

Philosophy. *Head, Heart, and Hands for Our Youngest Children* is committed to raising awareness and taking action to ensure that all young children have the support they need to ensure their optimal physical, emotional, intellectual, and social growth. Current research strongly suggests that healthy child development emerges from the interaction of a number of factors. For example, the Carnegie Task Force on Meeting the Needs of Young Children reports

> ***Brain development*** before the age of one is more rapid and extensive that previously realized. Brain development is also much more vulnerable to environmental influence than previously realized. In fact, when a child's early environment does not provide adequate stimulation—frequent interaction, physical activity, and a variety of experiences—then the child's brain may fail to grow optimally.
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> ***A nurturing parent*** provides infants with a sense of basic trust that allows them to feel confident in exploring the world and forming positive relationships with other children and adults. When parents are not able to respond sensitively to their infants' needs, because of factors such as marital conflict, depression, or their own history of abuse, the infant develops feelings of helplessness that lead to later difficulties.
>
> ***Health and nutrition*** are critical in the first year of life, as babies triple in weight, double in length, and achieve 80% of their brain growth. Good nutrition fuels this growth, as well as dynamic motor development—creeping, crawling, and walking. Good health care protects children from disease and corrects problems that interfere with normal growth. A safe environment enables children to grow without witnessing violence or trauma that can affect the child's self-confidence.
>
> ***Quality child care*** enables parents to leave their child with caring, qualified providers while they work or go to school. Child care providers play a critical role in ensuring that infants and toddlers experience healthy, nurturing stimulation while away from their parents.

Recommendations. These findings make clear that by ensuring a good start in life, we have a tremendous opportunity to promote learning and prevent damage to our youngest citizens. It is critically important that a comprehensive, coordinated system of education, child care, and support services be available for every infant and toddler and their family in this state. We urge policymakers and state and community leaders to work together to ensure the establishment of such a system by adopting the following recommendations: *(insert list developed by the local Task Force)*

About the SERVE Organization

SERVE, the SouthEastern Regional Vision for Education, is an educational organization whose mission is to promote and support the continual improvement of educational opportunities for all learners in the Southeast. To address the mission, SERVE engages in research and development in educational issues of critical importance to educators in the region and in the provision of research-based services to SEAs and LEAs which are striving for comprehensive school improvement. Committed to a shared vision of the future of education in the region, the organization is governed by a board of directors that includes the chief state school officers, governors, and legislative representatives from Alabama, Florida, Georgia, Mississippi, North Carolina, and South Carolina, and representatives of teachers and the private sector.

SERVE's core component is a Regional Educational Laboratory funded since 1990 by the Office of Educational Research and Improvement (OERI), U.S. Department of Education. SERVE has additional major funding from the Department in the areas of Migrant Education and School Leadership and is the lead agency in the Eisenhower Mathematics and Science Consortium for the Southeast and the Southeast and Islands Regional Technology in Education Consortium (SEIR◆TEC). Based on these grants and contracts, SERVE has developed a system of programs and initiatives that provides a spectrum of resources, services, and products for responding to local, regional, and national needs. These program areas are

- Program on Assessment, Accountability, and Standards
- Program for Children, Families, and Communities
- Program on Education Policy
- Program for the Improvement of Science and Mathematics Education
- Program on School Development and Reform
- Program on Technology in Learning

SERVE's National Specialty Area is Early Childhood Education, and the staff of SERVE's Program for Children, Families, and Communities is developing the expertise and the ability to provide leadership and support to the early childhood community nationwide for children from birth to eight years old.

In addition to the program areas, the SERVE Evaluation Department supports the evaluation activities of the major grants and contracts and provides evaluation services to SEAs and LEAs in the region. Through its Publishing and Quality Assurance Department, SERVE publishes a variety of studies, training materials, policy briefs, and other products of the programs. These informative and low-cost publications include guides to available resources, summaries of current issues in education policy, and examples of exemplary educational programs. Through its programmatic, evaluation, and publishing activities, SERVE also provides contracted staff development and technical assistance in many areas of expertise to assist education agencies in achieving their school improvement goals.

The SERVE head office is at the University of North Carolina at Greensboro, with major staff groups located in Tallahassee, FL, and Atlanta, GA, and policy advisors in each state department of education in the region. Current and detailed information on any of the program and service areas noted here may be found on SERVE's site on the World Wide Web at www.serve.org.

SERVE-Alabama

Education Policy Analyst
Office forthcoming—please call the SERVE main office for assistance at 800-755-3277

SERVE-Florida

Database Information Services Center
1203 Governor's Square Blvd.
Suite 400
Tallahassee, FL 32301
850-671-6012
800-352-3747
Fax 850-671-6020

School Development and Reform
SERVEing Young Children
Publishing and Quality Assurance
1203 Governor's Square Blvd.
Suite 400
Tallahassee, FL 32301
850-671-6000
800-352-6001
Fax 850-671-6020

Eisenhower Consortium for Mathematics and Science Education at SERVE
1203 Governor's Square Blvd.
Suite 400
Tallahassee, FL 32301
850-671-6033
800-854-0476
Fax 850-671-6010

Education Policy Analyst
Office of the Commissioner
The Capitol, LL 24
Tallahassee, FL 32399
850-488-9513
Fax 850-488-1492

SERVE-Georgia

Urban Education and Teacher Leadership
41 Marietta Street, NW
Suite 1000
Atlanta, GA 30303
800-755-3277
Fax 404-577-7812

Education Policy Analyst
Georgia Department of Education
2066 Twin Towers East
Atlanta, GA 30334
404-657-0148
Fax 404-651-4673

SERVE-Mississippi

Education Policy Analyst
State Department of Education
P.O. Box 771
Jackson, MS 39201
601-359-3501
Fax 601-359-3667
wmoore@serve.org

SERVE-North Carolina (MAIN OFFICE)

Assessment, Standards, and Accountability
Education Policy
Evaluation
Executive Services
Operations
P.O. Box 5367
Greensboro, NC 27435
336-334-3211
800-755-3277
Fax 336-334-3268

Anchor School Project
Children, Families, and Communities
Region IV Comprehensive Center
SERVE Leaders Institute
Southeast and Islands Regional Technology in Education Consortium
P.O. Box 5406
Greensboro, NC 27435
336-334-3211
800-545-7075
Fax 336-334-4671

Education Policy Analyst
Department of Public Instruction
Education Building
301 North Wilmington Street
Raleigh, NC 27601-2825
919-715-1245
Fax 919-715-1278

SERVE-South Carolina

Education Policy Analyst
Office forthcoming—please call the SERVE main office for assistance at 800-755-3277

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Dr. John R. Sanders
Executive Director, SERVE

www.serve.org

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2. Discounts are available for most SERVE products when you purchase units of fifty or more. Please contact 800-352-6001 for discount information.

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